Δ	nn	lica	tion	Ωr	Docket	Nh	mha
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PATENT APPLICATION FEE DETERMINATION RECORD

Effective December 29, 1999

CLAIMS AS FILED - PART I					SMALL ENTITY			OTHER THAN			
FOR		NII IN	(Column 1) (Colu NUMBER FILED NUMBER I			TYPE		OR	SMALL		
FUR		INOIV	MEN FILED	INDIVIDENT	EATHA	RATE	FEE		RATE	FEE	
BASIC FEE							345.00	OR		690.00	
то	TAL CLAIMS	2	3 minus 2	0= 1 3		X\$ 9=		OR	X\$18=	54	
INDEPENDENT CLAIMS / minus 3 = *						X39=		OR	X78=	3/2	
MU	LTIPLE DEPENI	+130=		OR	+260=						
* If	the difference	in column 1	is less than zer	TOTAL		OR	TOTAL	1056			
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)							OTHER THAN SMALL ENTITY OR SMALL ENTIT				
AMENDMENT A	3/23/04	CLAIMS REMAININ AFTER AMENDMEN		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	· 20	Minus	·· 25	=	X\$ 9=		OR	X\$18=		
	Independent	* //	Minus MULTIPLE DEP	ENDENT CLAIM	= /	X39=		OR	X78=		
	TINOTTREGE	TATION OF	MOETH EE DET	LINDENT OLAIM		+130=		OR	+260=		
						TOTAL		OR	TOTAL ADDIT. FEE		
		(Column	1)	(Column 2)	(Column 3)	ADDIT. FEE		•	AUUII. FEEI	<u></u>	
AMENDMENT B	131 cfs.	CLAIMS REMAININ AFTER AMENDME	G	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**	=	X\$ 9=	٠	OR	X\$18=		
	Independent	*	Minus F MULTIPLE DEP	***	=	X39=		OR	X78=		
┢	FINST PRESE	NIAHONO	F MOLTIPLE DEP	PENDENT CLAIM		+130=		OR	+260=		
						TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE		
		(Column		(Column 2)	(Column 3)						
AMENDMENT C		CLAIMS REMAININ AFTER AMENDME	G ,	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**	=	X\$ 9=		OR	X\$18=		
	Independent	*	Minus	***	=	X39=			X78=		
	FIRST PRESE	NTATION O	F MULTIPLE DEF	PENDENT CLAIM				OR		<u> </u>	
	If the entry in colum	mn 1 je loce th	on the entry in colu	mn 2 write "A" in se	duma 3	+130=		OR	+260=		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."											
Ī			y Paid For" (Total or			found in the app	propriate bo	x in co	lumn 1.		

*U.S. GPO: 2000-463-433/29044